B1 (Official Form 1)(1			~			~			<del> </del>		
		United		Banki		Court				Voluntary	<b>Petition</b>
Name of Debtor (if inc		er Last, First	, Middle):				Name of Joint Debtor (Spouse) (Last, First, Middle):  Cousland, Beth A				
All Other Names used (include married, maid			8 years				All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. (if more than one, state all xxx-xx-5176		vidual-Taxp	ayer I.D. (	ITIN) No./0	Complete E	(if mor	our digits one than one, s	tate all)	r Individual-Ta	xpayer I.D. (ITIN) N	No./Complete EIN
Street Address of Debt 3315 N. DeSoto Chandler, AZ		Street, City,	and State)	_	ZIP Code	33 <sup>,</sup> Ch		Soto Stree	*	et, City, and State):	ZIP Code
County of Residence o	r of the Princ	cipal Place o	f Business		85224		y of Reside	ence or of the	Principal Plac	e of Business:	85224
Mailing Address of De	btor (if diffe	rent from str	eet addres	ss):		Mailin	g Address	of Joint Debt	tor (if different	from street address)	:
				Г	ZIP Code						ZIP Code
Location of Principal A (if different from street			r								
(Form of C	age 2 of this les LLC and at one of the al	form. LLP) bove entities,	Sing in I Rail Stoc	Ith Care Bu gle Asset Re 1 U.S.C. § 1 road ekbroker nmodity Bro uring Bank er Tax-Exe	eal Estate as 101 (51B)  bker  mpt Entity , if applicable exempt org of the Unite	e) anization d States	defined "incurr	er 7 er 9 er 11 er 12 er 13 are primarily cold in 11 U.S.C. § ed by an indivi	Petition is File  Chacof a  Chacof a  Chacof a  Nature (Check of consumer debts,	one box)  Deb busi	Recognition eeding
■ Full Filing Fee atta □ Filing Fee to be parattach signed applicis unable to pay fee □ Filing Fee waiver rattach signed applice  Statistical/Administra □ Debtor estimates th	ched d in installment of the except in inequested (apartion for the extent of the exte	e court's constallments. I splicable to ce court's constallments	able to ind sideration Rule 1006( hapter 7 in sideration.	certifying the certifying the certifying the certification of the certif	hat the debt cial Form 3A only). Must Form 3B.	or Check	Debtor is if: Debtor's a to insiders all applica A plan is Acceptance	a small busin not a small b aggregate nor s or affiliates) ble boxes: being filed w ces of the pla	nusiness debtor ncontingent liq ) are less than s with this petition in were solicite accordance wi	defined in 11 U.S.C. as defined in 11 U.S. uidated debts (exclu \$2,190,000.	ding debts owed  ne or more (b).
Debtor estimates the there will be no fur  Estimated Number of C	ds available	exempt properties for distribut	perty is excion to uns	cluded and ecured cred	administrati itors.	ive expense	es paid,		_		
1- 50- 49 99	100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated Assets	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated Liabilities	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500	\$500,000,001 to \$1 billion		11/10/00	17.10.40	2

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Surgent, Scott A Cousland, Beth A (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Christopher J. Piekarski November 13, 2009 Signature of Attorney for Debtor(s) (Date) Christopher J. Piekarski Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certifies

B1 (Official Form 1)(1/08) Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

# Signatures

# Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

# X /s/ Scott A Surgent

Signature of Debtor Scott A Surgent

# X /s/ Beth A Cousland

Signature of Joint Debtor Beth A Cousland

Telephone Number (If not represented by attorney)

#### November 13, 2009

Date

## Signature of Attorney\*

## X /s/ Christopher J. Piekarski

Signature of Attorney for Debtor(s)

#### Christopher J. Piekarski 019251

Printed Name of Attorney for Debtor(s)

## Piekarski & Brelsford, P.C.

Firm Name

2633 E Indian School Road Suite 460

Phoenix, AZ 85016

Address

# Email: ecf@pb-lawfirm.com

# 602-956-1161 Fax: 480-247-4383

Telephone Number

# November 13, 2009

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

## **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Case 2:09-bk-29367-SSC Doc 1 Filed 11/13/09 Entered 11/13/09 17:13:48 Desc

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Surgent, Scott A Cousland, Beth A

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

<b>T</b>
•

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

B 1D(Official Form 1, Exhibit D) (12/08)

# United States Bankruptcy Court District of Arizona

In re	Scott A Surgent Beth A Cousland		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

Software Copyright (c) 1996-2009 Best Case Solutions - Evanston, IL - (800) 492-8037

B 1D(Official Form 1, Exhibit D) (12/08) - Cont. □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); ☐ Active military duty in a military combat zone. □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. I certify under penalty of perjury that the information provided above is true and correct. Signature of Debtor: /s/ Scott A Surgent Scott A Surgent Date: November 13, 2009

Software Copyright (c) 1996-2009 Best Case Solutions - Evanston, IL - (800) 492-8037

B 1D(Official Form 1, Exhibit D) (12/08)

# United States Bankruptcy Court District of Arizona

In re	Scott A Surgent Beth A Cousland		Case No.	
		Debtor(s)	Chapter	7
				'

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

Software Copyright (c) 1996-2009 Best Case Solutions - Evanston, IL - (800) 492-8037

B 1D(Official Form 1, Exhibit D) (12/08) - Cont.

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

Active military duty in a military combat zone.

5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor:

/s/Beth A Cousland

Beth A Cousland

Software Copyright (c) 1996-2009 Best Case Solutions - Evanston, IL - (800) 492-8037

**Date:** November 13, 2009

# **United States Bankruptcy Court District of Arizona**

In re	Scott A Surgent, Beth A Cousland		Case No.	
-		Debtors	Chapter	7

# SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	165,000.00		
B - Personal Property	Yes	4	128,150.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		171,745.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		54,719.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,519.61
J - Current Expenditures of Individual Debtor(s)	Yes	2			4,385.00
Total Number of Sheets of ALL Schedu	ıles	18			
	T	otal Assets	293,150.00		
			Total Liabilities	226,464.00	

Case 2:09-bk-29367-SSC Doc 1

Filed 11/13/09 Entered 11/13/09 17:13:48

# **United States Bankruptcy Court**

District of A	rizona		
Scott A Surgent, Beth A Cousland		Case No.	
Ε	Debtors ,	Chapter	7
STATISTICAL SUMMARY OF CERTAIN LIA  f you are an individual debtor whose debts are primarily consumer de case under chapter 7, 11 or 13, you must report all information reque  ☐ Check this box if you are an individual debtor whose debts are report any information here.  This information is for statistical purposes only under 28 U.S.C. § Summarize the following types of liabilities, as reported in the Sch	bts, as defined in § 1010 ested below.  NOT primarily consume	(8) of the Bankruptor debts. You are no	cy Code (11 U.S.C.§ 101(
Type of Liability	Amount		
Domestic Support Obligations (from Schedule E)	0	.00	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0	.00	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0	.00	
Student Loan Obligations (from Schedule F)	0	.00	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0	.00	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0	.00	
TOTAL	0	.00	
State the following:			
Average Income (from Schedule I, Line 16)	3,519	.61	
Average Expenses (from Schedule J, Line 18)	4,385	.00	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	5,382	.91	
State the following:			
1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column			6,745.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0	.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			0.00
4. Total from Schedule F			54,719.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)			61,464.00

•	
In	re

Scott A Surgent, **Beth A Cousland** 

Case No.

#### Debtors

# **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224	Fee simple	С	165,000.00	171,745.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 198 of Maps, Page 23.

Sub-Total >

165,000.00

(Total of this page)

Total >

165,000.00

•		
	n	rΔ

Scott A Surgent, Beth A Cousland

**Debtors** 

# SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X		
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan,	Checking accounts with Washington Mutual, Desert Schools Federal Credit Union and Bank of America	C C	300.00
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Bank accounts with Washington Mutual, Desert Schools and Bank of America	С	300.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	х		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Living room furniture, appliances and electronics: \$1000.00 Kitchen appliances, utensils, cookware and furniture: \$750.00 Dining room table, chairs and sideboard: \$200.00 Two Bedroom sets: \$500.00 Family room sofa, table, chairs and computer: \$400.00 Garage. Tools, shelves and furniture. Lawn furniture: \$300.00	С	3,250.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	CDs, books and pictures	С	500.00
6.	Wearing apparel.	His and her wardrobes	С	800.00
7.	Furs and jewelry.	His and her wedding rings	С	1,500.00
8.	Firearms and sports, photographic, and other hobby equipment.	Hiking and camping gear: \$500.00 Two pistols: \$400.00	С	900.00

Sub-Total > 7,550.00
(Total of this page)

In re	Scott A Surgent,
	Beth A Cousland

# Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
<ol> <li>Interests in insurance policies.         Name insurance company of each policy and itemize surrender or refund value of each.     </li> </ol>	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		TIAA CREF Retirment accounts	С	109,000.00
<ol> <li>Stock and interests in incorporated and unincorporated businesses. Itemize.</li> </ol>	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
<ol> <li>Government and corporate bonds and other negotiable and nonnegotiable instruments.</li> </ol>	X			
16. Accounts receivable.		Debtor/ husband has received periodic royalty payments for a published book. Debtor received payment of \$50.00 in 2009 and does not know if there will be any future royalties.	С	0.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars				
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
		(Tot:	Sub-Tota al of this page)	al > 109,000.00

Sheet <u>1</u> of <u>3</u> continuation sheets attached

In re	Scott A Surgent,
	Beth A Cousland

Case No.

# Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Proper	rty	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	Х				
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х				
22.	Patents, copyrights, and other intellectual property. Give particulars.	X				
23.	Licenses, franchises, and other general intangibles. Give particulars.	X				
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X				
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2001 Nissan Frontier 165k miles		С	8,500.00
			2001 Subaru Legacy Outback 55k miles		С	3,000.00
26.	Boats, motors, and accessories.	X				
27.	Aircraft and accessories.	X				
28.	Office equipment, furnishings, and supplies.	X				
29.	Machinery, fixtures, equipment, and supplies used in business.	X				
30.	Inventory.	X				
31.	Animals.		2 cats		С	0.00
32.	Crops - growing or harvested. Give particulars.	X				
				(Total	Sub-Tota	al > 11,500.00

(Total of this page)

Sheet **2** of **3** continuation sheets attached

Scott A Surgent, In re **Beth A Cousland** 

Case No.
----------

## Debtors

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
33.	Farming equipment and implements.	Х			
34.	Farm supplies, chemicals, and feed.	x			
35.	Other personal property of any kind not already listed. Itemize.	Her pe	rsonal and costume jewelry	С	100.00

100.00 Sub-Total > (Total of this page)

Total > 128,150.00

Best Case Bankruptcy

Sheet <u>3</u> of <u>3</u> continuation sheets attached

Page 14 of 53

In re

Scott A Surgent, **Beth A Cousland** 

Debtor claims the exemptions to which debtor is entitled under:

Case No.

☐ Check if debtor claims a homestead exemption that exceeds

Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)	\$130,673.		
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property	A.i. D 0(-) 5 00 4404(A)	2.055.00	405.000.00
Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224	Ariz. Rev. Stat. § 33-1101(A)	3,255.00	165,000.00
Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 198 of Maps, Page 23.			
Checking, Savings, or Other Financial Accounts, (	Certificates of Deposit		
Checking accounts with Washington Mutual, Desert Schools Federal Credit Union and Bank of America	Ariz. Rev. Stat. § 33-1126A9	300.00	300.00
Bank accounts with Washington Mutual, Desert Schools and Bank of America	Ariz. Rev. Stat. § 33-1126A9	0.00	300.00
Household Goods and Furnishings Living room furniture, appliances and electronics: \$1000.00 Kitchen appliances, utensils, cookware and furniture: \$750.00 Dining room table, chairs and sideboard: \$200.00 Two Bedroom sets: \$500.00	Ariz. Rev. Stat. § 33-1123	3,250.00	3,250.00
Family room sofa, table, chairs and computer:			
\$400.00 Garage. Tools, shelves and furniture. Lawn furniture: \$300.00			
Books, Pictures and Other Art Objects; Collectible	s		
CDs, books and pictures	Ariz. Rev. Stat. § 33-1123(10)	500.00	500.00
Wearing Apparel			
His and her wardrobes	Ariz. Rev. Stat. § 33-1125(1)	800.00	800.00
Furs and Jewelry			
His and her wedding rings	Ariz. Rev. Stat. § 33-1125(4)	1,500.00	1,500.00
Firearms and Sports, Photographic and Other Hol		222.22	202.22
Hiking and camping gear: \$500.00 Two pistols: \$400.00	Ariz. Rev. Stat. § 33-1125(7)	900.00	900.00
Interests in IRA, ERISA, Keogh, or Other Pension	or Profit Sharing Plans		
TIAA CREF Retirment accounts	29 U.S.C.A. § 1056(d)	100%	109,000.00
Automobiles, Trucks, Trailers, and Other Vehicles 2001 Nissan Frontier 165k miles	Ariz. Rev. Stat. § 33-1125(8)	8,500.00	8,500.00

In re

Scott A Surgent, **Beth A Cousland** 

Case No.
Case No.

Debtors

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
2001 Subaru Legacy Outback 55k miles	Ariz. Rev. Stat. § 33-1125(8)	3,000.00	3,000.00		
Animals 2 cats	Ariz. Rev. Stat. § 33-1125(3)	0.00	0.00		

Total: 131,005.00 293,050.00

In re

Scott A Surgent, **Beth A Cousland** 

**Debtors** 

# SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME	CO	Hu	sband, Wife, Joint, or Community	CC	U N	D I	AMOUNT OF	
AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C J M	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXF_XGEX	LLQDLDAH	SPUTED	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 432567680707	]		Opened 7/01/07 Last Active 4/01/09 First Mortgage	Т	E D			
Desert Schoo Po Box 29232 Phoenix, AZ 85038		С	Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224 Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona,		ט			
			Value \$ 165,000.00				147,004.00	0.00
Account No. 1001000000000714803293  Washington Mutual Bank 3990 S Babcock St Melbourne, FL 32901		н	Opened 1/24/08 Last Active 1/26/09 Second mortgage Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224 Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona,					
			Value \$ 165,000.00				24,741.00	6,745.00
Account No.			Value \$					
Account No.								
			Value \$					
continuation sheets attached	Subtotal (Total of this page)						171,745.00	6,745.00
	Total 171,745.00 6,7					6,745.00		

n	re

Scott A Surgent, Beth A Cousland

**Debtors** 

# SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. $\S$ 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

Desc

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In	re

Scott	Α	Surg	ent,
Beth	Δ	Cous	land

Case No	
· · · · · · · · · · · · · · · · · · ·	

**Debtors** 

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBLOR	Hu:	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UZL-QU-DAH	I U	<u> </u>	AMOUNT OF CLAIM
Account No. 4003-9040-0164-5896/ 5904			Commercial credit card. Joint with debtor and	Ť	ΙE			
Bank of America, N.A./ Bankruptcy Dept. 4161 Piedmont Prkway NC4-105-03-14 Greensboro, NC 27410		С	Xaler press.		D			4,500.00
Account No. 648352344		П	5/03/07			Г	Ť	
Credit First N.A. 6275 Eastland Rd. Brook Park, OH 44142		Н	ChargeAccount					400.00
Account No. 4196		$\vdash$	9/20/04	_		L	+	400.00
FIA Card Services, NA 1100 North King Street Wilmington, DE 19801		С	CreditCard					26,267.00
Account No. <b>604576103367</b>			12/12/07			H	†	
GE Money Bank 4246 South Riverboat Road Suite 200 Salt Lake City, UT 84123		w	QVC Charge Account					1,536.00
				<u>L</u>		Ļ	$\downarrow$	1,550.00
_2 continuation sheets attached			(Total of t	Subt his			,	32,703.00

In re	Scott A Surgent,	Case No.
	Beth A Cousland	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	Ţ	РΤ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBFOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTLNGENT	I Q			AMOUNT OF CLAIM
Account No. 6018595521326393			11/30/04	] T	ΙE			
GE Money Bank 4246 South Riverboat Road Suite 200 Salt Lake City, UT 84123		w	Gap Charge Account		D			Unknown
Account No. 542270200863			1/01/95			Τ	T	
JPMorgan Chase Bank, NA 1111 Polaris Parkway Columbus, OH 43240		н	CreditCard					11,975.00
Account No. 403115120049			4/13/00	T	T	t	7	
JPMorgan Chase Bank, NA 1111 Polaris Parkway Columbus, OH 43240		w	Consumer debt					5,276.00
Account No. <b>554285500070</b>			2/01/01	T	T	t	7	
JPMorgan Chase Bank, NA 1111 Polaris Parkway Columbus, OH 43240		w	CreditCard					3,606.00
Account No. 6018595521326393			11/26/08		Г	T	7	
LVNV Funding LLC 12650 Ingenuity Drive Orlando, FL 32878		w	Factoring Company Account Ge Capital The Gap					215.00
Sheet no1 of _2 sheets attached to Schedule of	•			Subt	tota	al	7	24 072 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ge	al	21,072.00

In re	Scott A Surgent,	Case No.
	Beth A Cousland	

# Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE,	CODEBTOR	H	DATE CLAIM WAS INCURRED AND	C O N T	UNLL	DISPUTER	
AND ACCOUNT NUMBER (See instructions above.)	B T O R	J	CONSIDERATION FOR CLAIM. IF CLAIM	INGENT	QU L DA	U T E D	AMOUNT OF CLAIM
Account No. 585637200303		T	5/01/07	1 ï	Ť	D	
World Financial Network National Bank 3100 Easton Square Place Columbus, OH 43219		W	J Crew Charge Account		D		
							944.00
Account No.							
Account No.	t	$^{\perp}$		+			
	l						
Account No.	1						
Account No.	╂	+		╁			
Account No.	ł						
Sheet no. 2 of 2 sheets attached to Schedule of		_		Subt	tota	1	24455
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	944.00
					ota		
			(Report on Summary of So	hed	lule	es)	54,719.00

Filed 11/13/09 Entered 11/13/09 17:13:48 Case 2:09-bk-29367-SSC Doc 1

1	n	re

Scott A Surgent, Beth A Cousland

Case No.

Debtors

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

1	n	re

Scott A Surgent, Beth A Cousland

Case No.

Debtors

# **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

	Scott A Surgent
In re	Beth A Cousland

1	$\overline{}$	_	h	tc	 (6	,

Case No.

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDENTS	OF DEBTOR A	ND SPOUSE		
Married	RELATIONSHIP(S): None.		EE(S):		
Warrieu	None.				
Employment:*	DEBTOR		SPOUSE		
Occupation	Sr. Lecturer	Disabled			
Name of Employer	Arizona St University- Mathematics Dept				
How long employed	15 years				
Address of Employer	•				
	Tempe, AZ 85287				
*See Attachment for Additional					
	or projected monthly income at time case filed)		DEBTOR	S	SPOUSE
	nd commissions (Prorate if not paid monthly)		\$ 5,382.91	\$	0.00
2. Estimate monthly overtime			\$ <u>0.00</u>	\$	0.00
			÷ 5 202 04		0.00
3. SUBTOTAL			\$ 5,382.91	\$	0.00
4. LESS PAYROLL DEDUCTIO	MIC				
a. Payroll taxes and social se			\$ 1,345.50	•	0.00
b. Insurance	ecurity		\$ 1,343.30 \$ 141.00	ф —	0.00
c. Union dues			\$ <u>141.00</u> \$ 0.00	ф —	0.00
	andatory Retirement		\$ 376.80	ф <u> </u>	0.00
d. Other (Specify).	andatory Nethrement		\$ 0.00	\$	0.00
			Ψ	Ψ	0.00
5. SUBTOTAL OF PAYROLL D	DEDUCTIONS		\$1,863.30	\$	0.00
6. TOTAL NET MONTHLY TAI	KE HOME PAY		\$3,519.61	\$	0.00
7. Regular income from operation	of business or profession or farm (Attach detailed state	tement)	\$ 0.00	\$	0.00
8. Income from real property		,	\$ 0.00	\$	0.00
9. Interest and dividends			\$ 0.00	\$	0.00
	port payments payable to the debtor for the debtor's us	e or that of	· -		
dependents listed above			\$0.00	\$	0.00
11. Social security or government	t assistance				
(Specify):			\$0.00	\$	0.00
<u> </u>			\$ 0.00	\$	0.00
12. Pension or retirement income			\$	\$	0.00
13. Other monthly income					
(Specify):		<del></del>	\$ 0.00	\$	0.00
			\$	\$	0.00
14. SUBTOTAL OF LINES 7 TH	IROUGH 13		\$0.00	\$	0.00
	OME (Add amounts shown on lines 6 and 14)		\$3,519.61	\$	0.00
	,	. 15)	\$	3,519.61	
10. COMBINED AVERAGE MC	ONTHLY INCOME: (Combine column totals from line	: 13)	Ψ	,	

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

In re	Scott A Surgent Beth A Cousland		Case No.	
		Debtor(s)	_	

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S) Attachment for Additional Employment Information

Debtor	
Occupation	Adjunct professor
Name of Employer	Maricopa Community Colleges
How long employed	
Address of Employer	2411 W. 14th Street
	Tempe, AZ 85281

Scott A Surgent In re Beth A Cousland

Debtor(s)

Case	No.		

# ${\bf SCHEDULE\ J-CURRENT\ EXPENDITURES\ OF\ INDIVIDUAL\ DEBTOR(S)}$

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

•		
☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,344.00
a. Are real estate taxes included? Yes X No		
b. Is property insurance included? Yes X No		
2. Utilities: a. Electricity and heating fuel	\$	275.00
b. Water and sewer	\$	65.00
c. Telephone	\$	120.00
d. Other	\$	0.00
3. Home maintenance (repairs and upkeep)	\$	75.00
4. Food	\$	600.00
5. Clothing	\$	100.00 50.00
<ul><li>6. Laundry and dry cleaning</li><li>7. Medical and dental expenses</li></ul>	\$	600.00
8. Transportation (not including car payments)	Ф 	864.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
10. Charitable contributions	\$	10.00
11. Insurance (not deducted from wages or included in home mortgage payments)	Ψ	
a. Homeowner's or renter's	\$	0.00
b. Life	\$	0.00
c. Health	\$	0.00
d. Auto	\$	150.00
e. Other See Detailed Expense Attachment	\$	32.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other	\$ \$	0.00
Other	<b>5</b>	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)	\$	4,385.00
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
<ol> <li>Debtor/ wife has a degenerative medical condition. Her monthly medical expenses and health insurance premiums are anticipated to increase by over 10% over the next year.</li> </ol>		
2. Debtor/ husband does not anticipating any contract work or supplemental income in order to provide additional care to wife.		
20. STATEMENT OF MONTHLY NET INCOME	•	
a. Average monthly income from Line 15 of Schedule I	\$	3,519.61
b. Average monthly expenses from Line 18 above	\$	4,385.00
c. Monthly net income (a. minus b.)	\$	-865.39

B6J (Official Form 6J) (12/07)

In re Scott A Surgent Beth A Cousland

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

# **Other Insurance Expenditures:**

Home warranty	\$ 20.00
Pet insurance	\$ 12.00
Total Other Insurance Expenditures	\$ 32.00

# **United States Bankruptcy Court District of Arizona**

Scott A Surgent In re Beth A Cousland			Case No.	
		Debtor(s)	Chapter	7

# DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLADATION UNDER DENIALTY OF DEDUIDY BY INDIVIDUAL DEDTOR

	DECLARATION UNDER FENALTT OF FERJURT BT INDIVIDUAL DEBTOR				
			ad the foregoing summary and schedules, consisting of est of my knowledge, information, and belief.		
Date	November 13, 2009	Signature	/s/ Scott A Surgent Scott A Surgent Debtor		
Date	November 13, 2009	Signature	/s/ Beth A Cousland Beth A Cousland Joint Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court District of Arizona

In re	Scott A Surgent Beth A Cousland			
		Debtor(s)	Chapter	7

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$35,000.00 Husband. Year to date.
\$84,173.00 Husband. 2008 income.
\$67,274.00 Year 2007:

## 2. Income other than from employment or operation of business

None

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

## 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS
OF CREDITOR
DATES OF
PAYMENTS
AMOUNT PAID
OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT

AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY

AND LOCATION

DISPOSITION

None
 b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

Software Copyright (c) 1996-2009 Best Case Solutions, Inc. - Evanston, IL - (800) 492-8037

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION,
FORECLOSURE SALE,
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF
PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION Goodwill Industries RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT **Ongoing** 

DESCRIPTION AND
VALUE OF GIFT
Clothing, appliances,
furniture and financial
donations. Value of \$1000.00

per annum.

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Desc

#### 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Piekarski & Brelsford PC 2942 N. 24th Street Suite 109 Phoenix, AZ 85016

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR May 12, 2009

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$1500.00 plus filing fees.

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

Software Copyright (c) 1996-2009 Best Case Solutions, Inc. - Evanston, IL - (800) 492-8037

## 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

## NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

Desc

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six vears immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

NAME **Xalerpress**  ADDRESS 3315 N. DeSoto Chandler, AZ 85224

NATURE OF BUSINESS Sole proprietorship. Writing/ book sales BEGINNING AND ENDING DATES 1994 until the present

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Scott Surgent 3315 N. DeSoto Chandler, AZ 85224 DATES SERVICES RENDERED **1994 until the present.** 

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

**Scott Surgent** 

Desc

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

## 20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY May 2009

INVENTORY SUPERVISOR

**Scott Surgent** 

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis) **Twenty books compiling National** 

Hockey League statistics.

DATE OF INVENTORY

None

May 2009

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

RECORDS **Scott Surgent** 

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

3315 N. DeSoto Chandler, AZ 85224

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE NAME AND ADDRESS TITLE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	November 13, 2009	Signature	/s/ Scott A Surgent Scott A Surgent Debtor
Date	November 13, 2009	Signature	/s/ Beth A Cousland
		-	Beth A Cousland Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

# **United States Bankruptcy Court District of Arizona**

In re	Scott A Surgent Beth A Cousland		Case No.	
		Debtor(s)	Chapter	7

### CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A -** Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

property of the estate. Attach ad	lditional pages if neo	cessary.)
Property No. 1		
Creditor's Name: Desert Schoo		Describe Property Securing Debt: Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224  Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 198 o
Property will be (check one):		
■ Surrendered	☐ Retained	
If retaining the property, I intend to (check a  ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain		oid lien using 11 U.S.C. § 522(f)).
Property is (check one):		
■ Claimed as Exempt		☐ Not claimed as exempt

Software Copyright (c) 1996-2009 Best Case Solutions - Evanston, IL - (800) 492-8037

Page 2 B8 (Form 8) (12/08) Property No. 2 Creditor's Name: **Describe Property Securing Debt:** Washington Mutual Bank Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224 Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 198 0 Property will be (check one): ■ Surrendered ☐ Retained If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain \_ (for example, avoid lien using 11 U.S.C. § 522(f)). Property is (check one): ■ Claimed as Exempt ☐ Not claimed as exempt PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.) Property No. 1 Lessor's Name: **Describe Leased Property:** Lease will be Assumed pursuant to 11 -NONE-U.S.C. § 365(p)(2): □ NO  $\square$  YES I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease. Date November 13, 2009 Signature /s/ Scott A Surgent **Scott A Surgent** Debtor Date November 13, 2009 Signature /s/ Beth A Cousland Beth A Cousland

Joint Debtor

# United States Bankruptcy Court District of Arizona

T	Scott A Surgent  Beth A Cousland		Cara Na	
In r	beth A Cousiand	Debtor(s)	Case No. Chapter	7
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptc	y, or agreed to be pai	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,500.00
	Prior to the filing of this statement I have received		\$	1,500.00
	Balance Due		\$	0.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed compensation	tion with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of			
5.	In return for the above-disclosed fee, I have agreed to render	legal service for all aspec	s of the bankruptcy of	ease, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering</li> <li>b. Preparation and filing of any petition, schedules, statemer</li> <li>c. Representation of the debtor at the meeting of creditors and</li> <li>d. [Other provisions as needed]         Negotiations with secured creditors to redureaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on housel     </li> </ul>	nt of affairs and plan which nd confirmation hearing, a ce to market value; ex as needed; preparation	n may be required; and any adjourned hea emption planning	rings thereof;
6.	By agreement with the debtor(s), the above-disclosed fee doe Representation of the debtors in any discharany other adversary proceeding.	es not include the following argeability actions, jud	g service: cial lien avoidanc	es, relief from stay actions or
	C	ERTIFICATION		
this	I certify that the foregoing is a complete statement of any agrebankruptcy proceeding.	eement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Date	ed: November 13, 2009	/s/ Christopher J	. Piekarski	
	·	Christopher J. P	ekarski	
		Piekarski & Brels 2633 E Indian Sc		
		Suite 460 Phoenix, AZ 850	16	
		602-956-1161 Fa	x: 480-247-4383	
		ecf@pb-lawfirm.	com	

# UNITED STATES BANKRUPTCY COURT DISTRICT OF ARIZONA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### **Chapter 7:** Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments

**B 201** (12/08)

over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

•	* · · · · · · · · · · · · · · · · · · ·	
Christopher J. Piekarski	X /s/ Christopher J. Piekarski	November 13, 2009
Printed Name of Attorney	Signature of Attorney	Date
Address:		
2633 E Indian School Road		
Suite 460		
Phoenix, AZ 85016		
602-956-1161		
ecf@pb-lawfirm.com		
	Certificate of Debtor	
I (We), the debtor(s), affirm that I (we) had	ave received and read this notice.	
Scott A Surgent		
Beth A Cousland	X /s/ Scott A Surgent	November 13, 2009
Printed Name(s) of Debtor(s)	Signature of Debtor	Date

X /s/ Beth A Cousland

Signature of Joint Debtor (if any)

Software Copyright (c) 1996-2009 Best Case Solutions - Evanston, IL - (800) 492-8037

Case No. (if known)

November 13, 2009

Date

### United States Bankruptcy Court District of Arizona

In re	Scott A Surgent Beth A Cousland		Case No.	
mic		Debtor(s)	Chapter	7
		DECLARATION		
consisti		Cousland, do hereby certify, under penarect and consistent with the debtor(s)' scho		the Master Mailing List,
Date:	November 13, 2009	/s/ Scott A Surgent		
		Scott A Surgent Signature of Debtor		
Date:	November 13, 2009	/s/ Beth A Cousland Beth A Cousland Signature of Debtor		
Date:	November 13, 2009	/s/ Christopher J. Piekarski		
		Signature of Attorney Christopher J. Piekarski Piekarski & Brelsford, P.C. 2633 E Indian School Road Suite 460 Phoenix, AZ 85016		
		602-956-1161 Fax: 480-247-	4383	

MML-5

BANK OF AMERICA, N.A./ BANKRUPTCY DEPT. 4161 PIEDMONT PRKWAY NC4-105-03-14 GREENSBORO NC 27410

CREDIT FIRST N.A. 6275 EASTLAND RD. BROOK PARK OH 44142

DESERT SCHOO PO BOX 29232 PHOENIX AZ 85038

FIA CARD SERVICES, NA 1100 NORTH KING STREET WILMINGTON DE 19801

GE MONEY BANK 4246 SOUTH RIVERBOAT ROAD SUITE 200 SALT LAKE CITY UT 84123

GE MONEY BANK 4246 SOUTH RIVERBOAT ROAD SUITE 200 SALT LAKE CITY UT 84123

JPMORGAN CHASE BANK, NA 1111 POLARIS PARKWAY COLUMBUS OH 43240

JPMORGAN CHASE BANK, NA 1111 POLARIS PARKWAY COLUMBUS OH 43240

JPMORGAN CHASE BANK, NA 1111 POLARIS PARKWAY COLUMBUS OH 43240

LVNV FUNDING LLC 12650 INGENUITY DRIVE ORLANDO FL 32878 Surgent, Scott and Beth -

WASHINGTON MUTUAL BANK 3990 S BABCOCK ST MELBOURNE FL 32901

WORLD FINANCIAL NETWORK NATIONAL BANK 3100 EASTON SQUARE PLACE COLUMBUS OH 43219

In re	Scott A Surgent Beth A Cousland	According to the information required to be entered on this statement
	Debtor(s)	(check one box as directed in Part I, III, or VI of this statement):
Case N	Tumber: (If known)	☐ The presumption arises.
	(II KIIOWII)	■ The presumption does not arise.
		☐ The presumption is temporarily inapplicable.

### CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	□ <b>Declaration of Reservists and National Guard Members.</b> By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/ ☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	<ul> <li>b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>

Marfial/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a □ Unamired. Complete only Column A ("Debtor's Income") for Lines 3.11.  b. □ Marricd, not filing jointly, with declaration of separate house-holds. By checking this box, debtor declares under penalty of perjury:  "My spouse and I are legally separated under applicable non-bankrapticy low or my spouse and I are leving apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  d. □ Married, Infiling jointly, without the declaration of separate households set out in Line 2 a above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") and Column B ("Spouse's Income") and Column B ("Spouse's Income") and Column B ("Poblor's Income") and Column B ("Spouse's Income") for Lines 3-11.  d. □ Married, Infiling jointly, Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") and Column		Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION								
b. Married, not filing jointly, with declaration of separate households. By checking his box, debror declares under penalty of perjury.  'My spouse and 1 are legally separated under applicable to non-bankruptcy Low or my spouse and 1 are living apart.  C 'Debtor's Income')  for Lines 3-11.  d. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouses's Income") for Lines 3-11.  d. Married, filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouses's Income") for Lines 3-11.  d. Married, filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouses's Income") for Lines 3-11.  d. Married, filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouses's Income") for Lines 3-11.  d. Married, filing jointly, without the declaration of the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month totally asia, and enter the difference in the appropriate column(s) of Line 4. If you operate more than one between the difference in the appropriate column(s) of Line 4. If you operate more than one besides, profession or farm, enter aggregate numbers and provide details on an attachment. Debtor's Income  growth of the difference in the appropriate column(s) of Line 4. If you operate more than one besides, profession or farm, enter aggregate numbers and provide details on an attachment on besides, profession or farm, enter aggregate numbers and provide details on an attachment on the declaration of a business profession or farm, enter aggregate to the business expenses entered on Line and other real property income. Subtract Line b from Line a subtract Line b fro										
"My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evaluing the requirements of \$707(b)(2/4). of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11.  c.   Married, not filing jointly, without the declaration of separate households set out in I ine 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  d.   Married, filing jointly, Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  All figures must reflect average monthly income received from all sources, derived during the six calcular months prior to filing the bankrupely case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate column.  3 Gross wages, salary, tips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. Tyou operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the operating expenses expenses   \$ 0.00   \$ 0.00    b. Dordinary and necessary business expenses   \$ 0.00   \$ 0.00    c. Business income  Rents and other real property income. Subtract Line b from Line a difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.  Debtor Spouse   \$ 0.00   \$ 0.00    C. Business income  3 Gross receipts   \$ 0.00   \$ 0.00    C. Business income  4 Column B South of the business of the debtor of the debtor's dependents, including child support paid for that purpose. Do not include all monty or separate maintenance payments or anount										
purpose of evading the requirements of \$ 707(b)(2)(A) of the Bankrupicy Code. Complete only column A ("Debtor's Income") for Lines 3-11.  e. □ Married, not filing jointly, without the declaration of separate bousholds set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  d. ■ Married, filing jointly, Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  All figures must reflect average monthly income received from all sources, derived during the six calender months prior to filing the bankrupey case, ending on the last day of the month before she filing. If the amount of monthly income varied during the six months, you must divide the six-month tool by six, and enter the result on the appropriate line.  3 Gross wages, salary, fips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one under the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, subtract Line b from Line a 2.  Line b as a deduction in Part V.  a. Gross receipts										
for Lines 3-11.  c. Darried, not filing jointly, without the declaration of separate bouscholds set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six month total by six, and enter the result on the appropriate line.  3 Gross wages, salary, tips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide clearlis on an articularient. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.    Debtor   Spouse   S   0.00   S   0.00	2									
("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the benkruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.  3 Gross wages, salary, tips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, cutra aggregate unulers and provide details on an attachment. Do not enter a number less than zor. Do not include any part of the business expenses entered on Line b as a deduction in Part V.  Bayes and there real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business and the property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not include any part of the operating expenses is 0.00 \$ 0.00	2		ing column 11 ( Be	otor s'income )						
d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bahartopic case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.  3 Gross vages, salary, tips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.    Debtor			above. Complete b	oth Column A						
All figures must reflect average monthly income received from all sources, derived during the six calendar months pirot to filing the bankt upon the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.  3 Gross wages, salary, fips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter agregate tumbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.  Debtor Spouse  E. Business income  Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.  Debtor Spouse  Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.  Debtor Spouse  B. Gross receipts  Debtor Spouse  Rents and other real property income. Subtract Line b from Line a  Count in a part of the operating expenses of the debtor of the operating expenses in Debtor Spouse  Rent and other real property income. Subtract Line b from Line a  Count in a part of the operating expenses of the debtor of the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse following the payments or amounts paid by your spouse following that the social Security Act, do not list the amount of such compensation in Column A or 8, b										
calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.  Gross wages, salary, tips, bonuses, overtime, commissions.  Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.  Debtor Spouse  a. Gross receipts  Debtor Spouse  Business income  Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.  Debtor Spouse  Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.  Debtor Spouse  Income To have the difference in the appropriate column(s) of Line 9. Do 0.00  C. Rent and other real property income Subtract Line b from Line a set of the difference in the appropriate column(s) of Line 9. Do 0.00  Interest, dividends, and royalties.  Pension and retirement income.  Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments paid by your spouse was a benefit under the Social Security Act. Debtor Spouse				for Lines 3-11.						
the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.  3 Gross wages, salary, tips, bonuses, overtime, commissions.  5 Lincome from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on at enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.  Debtor Spouse  B. Gross receipts Spouses Spouses Spouses Spouses Spouses Spouses Spouse Sp			Column A	Column B						
Gross wages, salary, tips, bonuses, overtime, commissions.   S,382.91   \$ 0.00										
Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.    Debtor			Income	Income						
Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line bas a deduction in Part V.    Debtor   Spouse	3	Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 5,382.91	\$ 0.00						
business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not netter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.    Each   Debtor   Spouse   Spo		<b>Income from the operation of a business, profession or farm.</b> Subtract Line b from Line a and	·							
not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.    Debtor   Spouse										
Line b as a deduction in Part V.    Debtor   Spouse										
Debtor   Spouse	4									
Description   Subtract Line b from Line a   Subtract Line b from Line a	·									
C.   Business income   Subtract Line b from Line a   \$ 0.00   \$ 0.00										
Rents and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.    Debtor   Spouse										
the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.    Debtor   Spouse			\$ 0.00	\$ 0.00						
part of the operating expenses entered on Line b as a deduction in Part V.    Debtor   Spouse										
a.   Gross receipts   \$   0.00   \$   0.00     b.   Ordinary and necessary operating expenses   \$   0.00   \$   0.00     c.   Rent and other real property income   Subtract Line b from Line a   \$   0.00   \$   0.00     6   Interest, dividends, and royalties.   \$   0.00   \$   0.00     7   Pension and retirement income.   \$   0.00   \$   0.00     8   Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.     0.00   \$   0.00     9   Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9.     0.00										
Debtor   Spouse   Column B is completed, but include alimony or separate maintenance, Do not include alimony or separate maintenance. Do not include alimony or separate maintenance payments of alimony or separate maintenance. Do not include alimony or separate maintenance payments of alimony or separate maintenance. Do not include alimony or separate maintenance payments of alimony or separate maintenance. Do not include alimony or separate maintenance payments of alimony or separate maintenance. Do not include alimony or separate maintenance payments of alimony or separate maintenance. Do not include alimony or separate maintenance payments of alimony or separate maintenance. Do not include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse	5									
C.   Rent and other real property income   Subtract Line b from Line a   \$ 0.00 \$ 0.00 \$										
Interest, dividends, and royalties.  Pension and retirement income.  Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.  Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act.  Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse  a. B. S. S. S.  Debtor Spouse  a. B. S. S. S.  Total and enter on Line 10  Subtotal of Current Monthly Income for \$ 707(b)(7). Add Lines 3 thru 10 in Column A, and, if		7 7 1 5 1								
Pension and retirement income.  Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.  Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00 \$										
Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.  Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00			\$ 0.00	\$ 0.00						
expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.  Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00	7		\$ 0.00	\$ 0.00						
purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.  Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00 \$ 0.										
Spouse if Column B is completed.  Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00 \$ 0.00 \$ 0.00  Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse  a.	8									
However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$ 0.00 Spouse \$ 0.00 \$ 0.00 \$ 0.00  Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse  a.			\$ 0.00	\$ 0.00						
benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act  Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse  a.										
or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act  Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse  a.										
Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00 \$ 0.00  Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse	9									
Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse										
Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse		lle e a a a a a a a a a a a a a a a a a	\$ 0.00	s 0.00						
spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse			7	-						
maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse										
received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse										
10										
a.	10									
b. Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if										
Total and enter on Line 10 \$ 0.00 \$ 0.00  Subtotal of Current Monthly Income for \$ 707(b)(7). Add Lines 3 thru 10 in Column A, and, if										
Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if										
			\$ 0.00	\$ 0.00						
	11		\$ 5.382.91	\$ 0.00						

	_					
12	Total Current Monthly Income for § 707(b)(7). If Column B has Column A to Line 11, Column B, and enter the total. If Column I the amount from Line 11, Column A.	1 '	S		5,382.91	
	the uniount from Eme 11, Column 11.				0,000	
	Part III. APPLICATION OF	<b>7 § 707(b)(7) EXCLUSION</b>				
13	Annualized Current Monthly Income for § 707(b)(7). Multiply enter the result.	the amount from Line 12 by the n	umber 12 and	\$	64,594.92	
14	<b>Applicable median family income.</b> Enter the median family inco (This information is available by family size at <a href="www.usdoj.gov/us">www.usdoj.gov/us</a>	* *				
	a. Enter debtor's state of residence: AZ b. En	ter debtor's household size:	2	\$	56,894.00	
	<b>Application of Section 707(b)(7).</b> Check the applicable box and	proceed as directed.				
15	☐ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.					
	■ The amount on Line 13 is more than the amount on Line 14	• Complete the remaining parts of	this statement.			

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULA	ATION OF CUR	REN	T MONTHLY INCOM	1E FOR § 707(b)(2	2)	
16	Enter the amount from Line 12.					\$	5,382.91
17	Marital adjustment. If you checked Column B that was NOT paid on a dependents. Specify in the lines bel spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zer	regular basis for the h ow the basis for exclu- support of persons of purpose. If necessary,	ouseh ding t ther th	old expenses of the debtor or he Column B income (such a an the debtor or the debtor's of	the debtor's s payment of the dependents) and the		.,
	a.			\$			
	b. c.			\$ \$			
	d.			\$			
	Total and enter on Line 17					\$	0.00
18	Current monthly income for § 70	7(b)(2). Subtract Line	e 17 fr	om Line 16 and enter the resu	ılt.	\$	5,382.91
	Subpart A: Dec	ductions under Sta	ndar	EDUCTIONS FROM ds of the Internal Revenu	e Service (IRS)		
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)						985.00
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.  Household members under 65 years of age  Household members 65 years of age or older					\$	303.00
	a1. Allowance per member	60		Allowance per member	144		
	b1. Number of members		b2.	Number of members	0		
	c1. Subtotal	120.00		Subtotal	0.00	\$	120.00
20A	Local Standards: housing and uti Utilities Standards; non-mortgage e	expenses for the application	cable c	county and household size. (7			
	available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or	irom the cierk of the I	oankru	ipicy court).		\$	433.00

20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by your home, as stated in L the result in Line 20B. Do not enter an amount less than zero.	ty and household size (this information is purt); enter on Line b the total of the Average		
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,030.00	]	
	b. Average Monthly Payment for any debts secured by your	\$ 1,344.00		
	home, if any, as stated in Line 42  c. Net mortgage/rental expense	\$ 1,344.00 Subtract Line b from Line a.	$\ _{\mathbb{S}}$	0.00
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:  Increased utilities related to wife's medical condition.	led under the IRS Housing and Utilities	\$	100.00
			_ Þ	100.00
22A	Local Standards: transportation; vehicle operation/public transpo You are entitled to an expense allowance in this category regardless o vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expens included as a contribution to your household expenses in Line 8.	f whether you pay the expenses of operating a	1	
ZZA	□ 0 □ 1 ■ 2 or more.			
	If you checked 0, enter on Line 22A the "Public Transportation" amount Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or	\$	464.00	
22B	<b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for you public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owners vehicles.)			
	$\square$ 1 $\square$ 2 or more.			
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Linthe result in Line 23. <b>Do not enter an amount less than zero.</b>	court); enter in Line b the total of the Average		
	a. IRS Transportation Standards, Ownership Costs	\$ 489.00	]	
	Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42	\$ 0.00		
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	$\ _{\$}$	489.00
24	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Linthe result in Line 24. Do not enter an amount less than zero.	IRS Local Standards: Transportation court); enter in Line b the total of the Average	· · · · · · · · · · · · · · · · · · ·	
	a. IRS Transportation Standards, Ownership Costs	\$ 489.00	]	
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 42	\$ 0.00		
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	489.00
25	Other Necessary Expenses: taxes. Enter the total average monthly estate and local taxes, other than real estate and sales taxes, such as inc	ome taxes, self employment taxes, social		
	security taxes, and Medicare taxes. Do not include real estate or sale	s taxes.	\$	1,345.50

26				
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total a deductions that are required for your employment, such as retirement contributions, union Do not include discretionary amounts, such as voluntary 401(k) contributions.	\$	376.80	
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that life insurance for yourself. Do not include premiums for insurance on your dependent any other form of insurance.	\$	141.00	
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount pay pursuant to the order of a court or administrative agency, such as spousal or child sufinclude payments on past due obligations included in Line 44.	\$	0.00	
29	Other Necessary Expenses: education for employment or for a physically or mentally the total average monthly amount that you actually expend for education that is a condition education that is required for a physically or mentally challenged dependent child for who providing similar services is available.	\$	0.00	
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you childcare - such as baby-sitting, day care, nursery and preschool. <b>Do not include other e</b>	\$	0.00	
31	Other Necessary Expenses: health care. Enter the total average monthly amount that y health care that is required for the health and welfare of yourself or your dependents, that insurance or paid by a health savings account, and that is in excess of the amount entered include payments for health insurance or health savings accounts listed in Line 34.	\$	480.00	
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.			120.00
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.	\$	5,543.30	
	Subpart B: Additional Living Expense Dedu			
	Note: Do not include any expenses that you have listed	d in Lines 19-32		
	Note: Do not include any expenses that you have listed  Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your sidependents.	the monthly expenses in		
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your sidependents.	the monthly expenses in		
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your sidependents.	the monthly expenses in pouse, or your		
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your sdependents.  a. Health Insurance \$ 1	the monthly expenses in pouse, or your  60.00	\$	160.00
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your s dependents.  a. Health Insurance \$ 1 b. Disability Insurance \$	the monthly expenses in pouse, or your  60.00  0.00	\$	160.00
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your stependents.  a. Health Insurance \$ 1 b. Disability Insurance \$ \$ c. Health Savings Account \$	the monthly expenses in pouse, or your  60.00  0.00  0.00	\$	160.00
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your statements.  a. Health Insurance \$ 1  b. Disability Insurance \$ 5  c. Health Savings Account \$ Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly	the monthly expenses in pouse, or your  60.00  0.00  0.00	\$	160.00
34	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your stependents.  a. Health Insurance \$ 1  b. Disability Insurance \$ \$  c. Health Savings Account \$ \$  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly below:  \$  Continued contributions to the care of household or family members. Enter the total expenses that you will continue to pay for the reasonable and necessary care and support ill, or disabled member of your household or member of your immediate family who is un	the monthly expenses in pouse, or your  60.00 0.00 0.00 v expenditures in the space  average actual monthly of an elderly, chronically		
35	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your stependents.  a. Health Insurance \$ 1   b. Disability Insurance \$   c. Health Savings Account \$    Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly below:  \$	the monthly expenses in pouse, or your  60.00 0.00 0.00 v expenditures in the space  average actual monthly of an elderly, chronically nable to pay for such  y expenses that you	\$	160.00
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your sidependents.  a. Health Insurance \$ 1  b. Disability Insurance \$ \$  c. Health Savings Account \$ \$  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly below:  \$  Continued contributions to the care of household or family members. Enter the total expenses that you will continue to pay for the reasonable and necessary care and support ill, or disabled member of your household or member of your immediate family who is unexpenses.  Protection against family violence. Enter the total average reasonably necessary monthly actually incurred to maintain the safety of your family under the Family Violence Preven other applicable federal law. The nature of these expenses is required to be kept confident.	the monthly expenses in pouse, or your  60.00 0.00 0.00 v expenditures in the space  average actual monthly of an elderly, chronically nable to pay for such  y expenses that you tion and Services Act or tial by the court.		
35	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your s dependents.  a. Health Insurance \$ 1  b. Disability Insurance \$ 1  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly below:  \$	the monthly expenses in pouse, or your  60.00 0.00 0.00 v expenditures in the space  average actual monthly of an elderly, chronically nable to pay for such  y expenses that you tion and Services Act or tial by the court.  specified by IRS Local u must provide your case	\$	0.00
35	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the categories set out in lines a-c below that are reasonably necessary for yourself, your s dependents.  a. Health Insurance \$ 1  b. Disability Insurance \$ 5  C. Health Savings Account \$ 1  Total and enter on Line 34.  If you do not actually expend this total amount, state your actual total average monthly below:  \$	the monthly expenses in pouse, or your  60.00 0.00 0.00  7 expenditures in the space  average actual monthly of an elderly, chronically nable to pay for such  y expenses that you tion and Services Act or tial by the court.  specified by IRS Local u must provide your case the additional amount  hly expenses that you entary or secondary	\$	0.00

39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				35.00
40	<b>Continued charitable contributions.</b> Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).				0.00
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40			\$	195.00
		<b>Subpart C: Deductions for De</b>	bt Payment		
42	own, list the name of the credito and check whether the payment amounts scheduled as contractual bankruptcy case, divided by 60. Average Monthly Payments on I		d state the Average Monthly Payment, onthly Payment is the total of all months following the filing of the arate page. Enter the total of the		
	Name of Creditor	Property Securing the Debt	Average Monthly Does payment include taxes or insurance?		
	a. Desert Schoo	Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224  Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 198 o	\$ <b>1,150.00</b> ■yes □no		
	b. <b>Washington Mutual B</b> a	Family residence located at: 3315 N. DeSoto Chandler, Arizona 85224  Legally Known As: Lot 121, of CARRIAGE LANE VII, according to the plat of record in the office of the County Recorder of Maricopa County, Arizona, recorded in Book 198 o	\$ 194.00 ■yes □no	¢	1 244 00
		. 15 6114 114 114 12	Total: Add Lines	\$	1,344.00
43	motor vehicle, or other property your deduction 1/60th of any am payments listed in Line 42, in or sums in default that must be paid the following chart. If necessary	nims. If any of debts listed in Line 42 are seconecessary for your support or the support of about (the "cure amount") that you must pay der to maintain possession of the property. It in order to avoid repossession or foreclosure, list additional entries on a separate page.	f your dependents, you may include in the creditor in addition to the The cure amount would include any re. List and total any such amounts in		
	Name of Creditor aNONE-	Property Securing the Debt	1/60th of the Cure Amount \$		
			Total: Add Lines	\$	0.00
44	priority tax, child support and al	ity claims. Enter the total amount, divided b imony claims, for which you were liable at t s, such as those set out in Line 28.		\$	0.00

	<b>Chapter 13 administrative expenses.</b> If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.						
45	a. b.	Projected average monthly Chapter 13 plan payment.  Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	10.00				
4.5	c.		otal: Multiply Lines a and b		0.00		
46	Tota	Deductions for Debt Payment. Enter the total of Lines 42 through 45.	т	\$ 1,34	4.00		
47	Total	Subpart D: Total Deductions from l of all deductions allowed under § 707(b)(2). Enter the total of Lines 33,					
47	Tota	Part VI. DETERMINATION OF § 707(b)(2)		\$ 7,08	32.30		
48	Ento	r the amount from Line 18 (Current monthly income for § 707(b)(2))	2) FRESUMF HON	I			
		• • • • • • • • • • • • • • • • • • • •	7/1-)/2))		32.91		
49	+	r the amount from Line 47 (Total of all deductions allowed under § 707		\$ 7,08	32.30		
50		thly disposable income under § 707(b)(2). Subtract Line 49 from Line 48		\$ -1,69	9.39		
51	60-m	<b>nonth disposable income under § 707(b)(2).</b> Multiply the amount in Line to	50 by the number 60 and enter the	\$ -101,96	3.40		
	Initia	al presumption determination. Check the applicable box and proceed as of	lirected.	1			
	■ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.						
52	☐ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.						
		☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 through 55).					
53	Ente	r the amount of your total non-priority unsecured debt		\$			
54	Thre	<b>hreshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.					
	Seco	ndary presumption determination. Check the applicable box and proceed	d as directed.				
55		the amount on Line 51 is less than the amount on Line 54. Check the box is statement, and complete the verification in Part VIII.	x for "The presumption does not ari	se" at the top of pa	age 1		
		he amount on Line 51 is equal to or greater than the amount on Line 54 ge 1 of this statement, and complete the verification in Part VIII. You may		ion arises" at the	top		
		Part VII. ADDITIONAL EXPENS	E CLAIMS				
	you a 707(l	<b>Expenses.</b> List and describe any monthly expenses, not otherwise stated and your family and that you contend should be an additional deduction from b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All item. Total the expenses.	om your current monthly income und	ler §			
56		Expense Description	Monthly Amou				
	a.	Additional groceries related to medical	\$ 200.0	00			
	b.		\$ \$	$\dashv$			
	d.		\$				
	П	Total: Add Lines a, b, c, and d	\$ 200.0	001			

	must sign.)	r	y FJ F		rue and correct. (If this is a joint case, both debtor
	must stgm.)	Date:	November 13, 2009	Signature:	/s/ Scott A Surgent
					Scott A Surgent
57					(Debtor)
		Date:	November 13, 2009	Signature	/s/ Beth A Cousland
					Beth A Cousland
					(Joint Debtor, if any)